

ways in which good nutrition may be assured at moderate cost.

5. Elimination of child labor under the age of 16 years and safeguards of employed youth 16 and 17 years of age in industrial and commercial occupations and other occupations where children and their parents are especially subject to commercialized exploitation, through direct Federal legislation, administered in cooperation with State agencies, made possible by completion of the ratification of the child labor amendment.

6. Widespread extension of educational and vocational guidance and junior placement service, built upon elementary and secondary school facilities and facilities for public recreation increasingly adequate to meet the needs of youth in a period of rapidly accelerated economic and social change.

7. Increased availability to rural as well as to urban children of public assistance when the economic ability of the normal breadwinner to provide for his family fails, and of case work, child guidance, recreational, and other community services for the early discovery and remedial treatment of conditions leading to child dependency, neglect, emotional instability, and delinquency.

8. Extension of services to crippled children, to include all physically handicapped children not otherwise able to obtain skilled medical, surgical, nursing, and social care, these programs being closely correlated with a sound program of education and guidance adapted to the needs of each child.

9. Development of comprehensive statewide and community programs for the care of the mentally deficient, including discovery, diagnosis, special class education, community supervision, and for those who need it, institutional or boarding home care.

10. Changed public attitude toward juvenile delinquency, based upon increasing awareness of the conditions leading to its development and the types of service in community, court, and training school which are essential if children thwarted and handicapped by untoward family and neighborhood conditions from their earliest years are to be given their fair chance in the world.

These are far-flung goals, but they are not beyond the knowledge and the resources which can be made available within the next ten years to those responsible for the health and welfare of American children. To achieve them, there must be assured the earnest cooperation of parents, schools, men's and women's civic organizations, public officials of localities and states, and the resources and leadership of the Federal Government.

As Grace Abbott has often said, what we would do for children this year cannot be postponed until next year, for children do not wait upon convenience. They live and thrive in proportion as we are understanding, loving, and resourceful in their service.

HOSPITAL INSURANCE*

Two months ago the San Francisco County Medical Society invited the Insurance Association of Approved Hospitals (Alameda Plan), to enter San Francisco for the purpose of selling hospital insurance. It has taken two months for the Hospital Conference to approve the Insurance Association of Approved Hospitals plan, but this was done on March 11, 1937, and by the time the "Bulletin" reaches you it is expected that many of the hospitals of San Francisco individually will have signed the contract.

The provisions of the plan as presented to prospective insurees are outlined below:

"In the event of sickness or disability through injury, expense results. Should hospitalization be necessary, a membership in this Association entitles you to the following service in one of the participating hospitals, while it in no way disturbs the relationship between your doctor and yourself. You make your own selection of physician or surgeon and pay him direct for his services.

Service covered by this membership includes:

Board and room—Ward accommodations. (Should a private room be desired, this may be obtained by paying the difference in rate directly to the hospital.)

General nursing care.

Operating-room service, including anesthesia if given by hospital employee.

* Reprinted from the "Bulletin" of the San Francisco County Medical Society.

Material appliances, such as splints, casts, etc. Dressings.

Physiotherapy treatments.

Drugs and medicines, with the exception of serums, vaccines, spirituous liquors and expensive proprietary drugs.

The Association will indemnify the patient to pay the pathologist for routine clinical laboratory services, *i. e.*, urinalysis, complete blood count, coagulation time, smears.

Indemnify the patient to pay the roentgenologist for the following services:

(a) In cases of accidental bodily injuries, all such services necessarily incident or required, exclusive of therapy, in the opinion of the attending physician, for the registered hospital bed patient.

(b) In cases of bodily illness or disease only when necessary to assist in diagnosis during hospitalization, and expressly excluding all therapy and any diagnostic services which could have been performed prior to admission to the hospital.

Membership covers hospitalization for twenty-one days for any one illness or accident during any twelve-month period.

If traveling, should you suffer an injury or sudden illness necessitating hospitalization, you will be provided with fourteen days' service in any accredited hospital in the United States or Canada.

Hospital service becomes effective:

1. For accidental injury—one day after application has been accepted.

2. For sickness or illness contracted or having its first signs or symptoms more than seven days after application has been accepted.

3. For illness or ailment requiring major or minor operation that is contracted or has its first signs or symptoms more than fifteen days after application has been accepted, except in the case of hernia, tonsillectomy or adenoidectomy which is twelve months after application has been accepted.

Services not provided in this contract are:

Tuberculosis, diagnosed cancer, venereal infection, mental disorders, occupational diseases or injuries covered by law, alcoholism, drug addiction, rest cure, intentional self-inflicted injuries (sane or insane), normal pregnancy, including cesarean section, abortions or services of special nurses.

Applicant must be in good health at time of application for membership and between eighteen and sixty-five years of age, but no medical examination is required. Hospitalization of any member must be upon the written order of a legally qualified doctor of medicine, whose credentials would be recognized by hospitals accredited by the American College of Surgeons.

Dues.—The rate per month shall be 90 cents per member, paid in advance; plus a registration fee of \$1, which must be paid at the time of filing application. Members will receive the same attention and courtesy in the hospital as if they were paying the bills personally.

Service covered by this contract is confined strictly to the care of registered hospital bed patients."

GERMAN MEASLES

Regulations of the California Department of Public Health for the Prevention of German Measles

At a recent meeting, the State Board of Public Health amended Rules 5 and 6 of the state regulations for the prevention and control of German measles. The complete regulations now read as follows:

Rule 1. Notification

Any person in attendance on a case of German measles, or a case suspected of being German measles, shall report the case immediately to the local health authority, who shall in turn report at least weekly, on the prescribed form, to the Director of the State Department of Public Health all cases so reported to him.

NOTE.—The report to the local health authority shall be in writing unless local rules permit notification by telephone.

When no physician is in attendance it shall be the duty of the head of the private house, or the proprietor or keeper